24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
New Day for America	C C00581868
Check if X 24-hour report 48-hour report New report Amends report filed	I on M M / D D / Y Y Y Y Y
Full Name of Payee New Day Media, LLC	Date of Public Distribution/Dissemination
Mailing Address 501 Morrison Road	03 04 2016
Suite 201	Amount
City State Zip Code	288931.54
Gahanna OH 43230	Transaction ID : SE.6032 Date of Disbursement or Obligation
Purpose of Expenditure Media Buy Category/ Type	03 / 03 / 2016
Name of Federal Candidate Support Office	e Sought: House District:
JOHN R KASICH Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
New Day Media, LLC	03
Mailing Address 501 Morrison Road	Amount
Suite 201	
City State Zip Code	449934.00
Gahanna OH 43230	Transaction ID : SE.6033 Date of Disbursement or Obligation
Purpose of Expenditure Media Buy Category/ Type	M 03 / D D / Y Y Y Y Y Y Y
	e Sought: House District:
JOHN R KASICH Oppose	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	738865.54
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	738865.54
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
	03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	